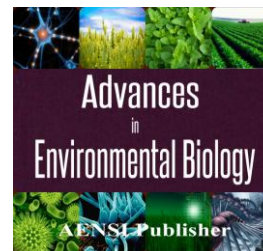




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Relationship between Family Functioning and Child Behavioral Problems

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ABSTRACT

Behavioral problems is important to study because of the wide range, co morbidity with other disorders and this fact that the existence of these disorders can prevent or delay positive development of children. This study examines the relationship between family functioning and behavioral problems in elementary school students of Rey. The sample included 119 families with school-aged girls who were selected by random cluster sampling. The mothers of the students responded McMaster Family Assessment Device (FAD) and Child Behavior Checklist (CBCL). The data analyze by Pearson correlation and multiple regression. Notable results show that overall performance of family can predict social problems, thought problems, rule-breaking behavior significantly. In sum, we can say that 7 dimensions of family functioning can explain considerable variation of 9 dimensions of behavioral disorders.

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INTRODUCTION

With the best and most complete facilities, the child is born, created and able to grow in the best intrinsic condition to achieve perfection and excellence. They born in a simple family and surrounding to grow and find her/ his stance in the world. By the way, deep mutations in health needs are occurred in contemporary age. Though, development of new facilities provide increased life, wide range of existing problems of societies, especially in developing countries create serious and controversial problems for health planners so that importance of current status have been highlighted and should not be ignored. According to report of Murry and Lopez and World Health Organization up to 2020, mental disorders are classified into acute and impotent diseases. Needless, mental disorders of children play a significant role in their adulthood and its chronic. Different studies show 4 to 5.7 % of staying disorder even up to maturity [5].

Due to emotional and behavioral disorder for their wideness, debilitating consequences and comorbidity with other disorders drug abuse, weak academic performance, unsafe sexual activity and suicide (Miller, 2004). Studies done indicate prevalence of behavioral disorders among school children is high (about 11 to 25 %) [4]. On the other hand, many children are challenging with these kinds of problems because of developed and unbalanced family and social conditions in the country over two last decades. Therefore, educational experts, child psychologists and related scholars make efforts severely to solve all problems in respect of emotional and behavioral disorders of children for their balanced and normal character. Emotional and behavioral disorders, emotional and behavioral responses to situations that are mentioned cultural norms of school, age and ethnic differences so that they have negative impact on educational performance, self-care, social interactions, individual adoption, classroom performance, and individual behavior in the workplace. Most children and adolescents have negative reaction against behavioral disorders and behave with others in a bad way. In most cases, teachers and classmates refuse them and consequently, their educational opportunities are reduced [3]. Behavioral disorders are classified in different manner of which some of them relied on advanced statistical methods. Behaviors clusters and patterns are specified. For example, Quay and Piterson (1987) divide behavioral disorders into six groups of: conduct disorder, social violence, attention deficit and conflict, anxiety, dissociative behaviors and hyperactivity. Akhenbakh study behavioral disorders in categories of depression/ anxiety, depression/withdrawal, physical and social problems, thinking and attention problems, breaking law, violent behaviors and other problems [6]. This research has been conducted in this category.

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Literature review show that many researchers have focused on basic behavioral disorders of children, since effective factors of behavioral disorders of children provide a background for intervention and prevention. Shanker (2008) believes that there are three determinants of family functioning, educational system and children competence in using educational skills. On the other hand, he expresses that children are affected by home (family), school and society of which family is more important. Also, theorists of involvement remark primary quality of mother- child relationship as a pattern for all interactions in the future and create cognitive and social development base of children. Many researches quote that parents and family relations play a key role in children development in a way that those especially, parent- child relation may occur behavioral and emotional disorders. For instance, research examined by Cablinski, Kvalanka & Randolph (2006) about role of parents in behavioral disorders of children in the America prove that parental function, life style, family conflicts and mother's depression are effective in prediction of their disorder. In other studies done by Carrie, Garbacz, Kwon, Sheriden & Woods, parents who believe their efficient parental role, have most impressive emotional relations with their children, intervene in their educational affairs and have live family and school relation.

Review of researches in Iran demonstrates importance of family functioning. Sharifi (2004) concluded in a research with title of study and comparison of family functioning and general, educational, emotional and social adjustment with 300 male and female samples in city of Oroumieh that there is a significant relationship between family functioning and adjustment aspects. Norouzi [7] supervised a research about impact and efficiency of family in mental disorder of 120 female adolescents (15- 18 years old) and deducted that there is a direct relationship between efficiency of families and mental disorder of adolescents. Amini [2] conducted a research about comparison of efficiency of family between 180 dependent and independent female students in third grade of high school, in city of Tehran, Region 4, using FAD test and Individual Dependency Questionnaire (IDQ) and discovered significant relationship of both groups in aspects of relation, emotional participation and general efficiency.

Petzold comments about importance of family functioning in children's behaviors, since family is responsible to support, keep and guide children. Family functioning may be investigated in seven factors of problem solving, functions, communications, affective responsiveness, affective involvement, behavioral control and general function. Researches show that families with fewer problems can face with them effectively and vice versa [13].

Problem solving manifest family ability in solving their problems so that family functioning should be impressively maintained. The problem is a difficulty with no simple and easy solution and may endanger family functioning [13]. Communication mention information and feelings exchange between two or more family members whether verbal or non- verbal. Functions are behavioral reversible patterns of which family members complete their needs and family functioning. Affective responsiveness implicit ability of family to respond to special situations also emotions which are appropriate in qualitative or quantitative manner. Affective involvement is a range of which family motivate to special activities and interests. Behavioral control is those behavioral patterns in a way that family is compatible with them to control problems in life [13] and finally, general function includes all six aspects. With due consideration to importance of behavioral and emotional disorders among children and no comprehensive study has been conducted about relationship of family functioning and behavioral problems among Iranian families also most researches abroad are about high school adolescents but not primary school children, this research has been surveyed with the aim of relationship of family functioning and behavioral problems among families of female primary school students.

Methods: Statistical Society, Sample and Research Methodology:

In view of goal, this current research is applied and descriptive in collecting data. Research methodology is surveying. Research plan is correlation and all female students' families in third and fourth grade of primary school in school term 2012- 13 in city of Shahre Ray form statistical society. The research has been conducted among 119 students who selected based on cluster random sampling. In the first stage, four schools and three classes are randomly selected. All mothers are invited to the schools and then research questionnaire distributed among them. Family assessment test was firstly submitted then Child Behavior Checklist (CBCL). The results were analyzed using SPSS software and multiple regressions.

Research Tools:

McMaster Family Assessment Scale: 60- item questionnaire for assessment of family performance is prepared based on McMaster. For the first time, Epstein, Baldoin and Bishop (1983) prepared it aiming to describe characteristics of family structure. It assesses family ability in adjustment with their commitments on reporter scale [13]. McMaster model focuses on that family efficiency with the most impact on physical and emotional health in family members. This model includes six aspects of family functioning i.e., problem solving, functions, Communications, affective responsiveness, affective involvement, and behavioral control. Moreover, grade of general function is equal to total grades. The test has suitable validity in difference of clinical and non- clinical families in each seven micro scale. Alpha coefficient is between 0.72 in functions and

behavioral control general function and 0.92 [13] among 503 samples. So, the tool is a good internal consistency. In Iran, Najarian make effort for normalization of family functioning assessment. He define alpha coefficient 0.93 among 510 samples in general function, Sayyadi alpha coefficient 0.93, Amini [2], 0.81 and Rezaei 0.91, all indicate high reliability. Mohammadzadeh and Malek Khosravi reported reliability retest with one week interval, 0.56 for affective responsiveness and 0.8 for functions. Ghadiri and Nooshkia reported 0.87 to 0.90 Cronbach's alpha coefficient. Alpha coefficient of this research is 0.62 in problem solving, 0.41 in communications, 0.64 in functions, 0.67 in affective responsiveness, 0.71 in affective involvement, 0.65 in behavioral control and 0.75 in general function.

Achenbach System of Empirically Based Assessment (ASEBA):

offers a set of forms for easy and economic assessment of qualifications, adoptive functioning and behavioral and emotional problems including three child behavior checklists which fill out by parents and self-report questionnaire (YSR) by students and teacher report form, all are parallel forms. Raw grades are converted to standard one T. Standard grades have been prepared for two age of 6 -11 and 12- 18. They have been provided by Asghar Minaei in city of Tehran, Region 11. Achenbach alpha coefficient is 0.74. Internal consistency CBCL in problems of anxiety/ depression, withdrawal, physical problems, social problems, thinking problems, attention problems, law breaking actions and aggressive behaviors was 86, 90, 88, 86,87,92,87, 92, 78 and 90 respectively. This research shows 78, 74,62,75,78, and 81,55,90,60 for internal consistency CBCL.

Results:

Table 1: shows descriptive amounts of variables.

Descriptive Amounts of Family Functioning and Behavioral Problems				
Variable	Min.	Max.	Mean	Standard Deviation
Anxiety/ Depression	35	77	52.05	12.24
Withdrawal/ Depression	40	84	51.76	10.90
Physical Problems	41	70	48.76	9.03
Social Problems	36	82	50.36	11.55
Thinking Problems	41	79	51.84	10.89
Attention Problems	37	79	52.10	11.93
Law breaking action	41	75	50.66	9.79
Aggressive Behavior	34	80	51.84	12.97
Others	34	79	52.19	12.28
Problem Solving	6	20	12.28	3.26
Functions	11	38	22.44	7.07
Communications	11	29	16.58	4.15
Affective Responsiveness	5	20	10.77	3.60
Affective Involvement	7	24	13.37	3.98
Behavioral Control	9	30	18.93	4.94
General Function	12	37	20.77	5.53

Table 2: shows existing correlation coefficient of family functioning and behavioral problems.

Variable	Anxiety/ Depression	Withdrawal/ Depression	Physical Problems	Social Problems	Thinking Problems	Attention Problems	Law breaking action	Aggressive behavior	Others
Problem Solving	**0.351	0.095	*0.206	**0.207	**0.239	*0.207	0.171	**0.316	**0.270
Functions	-0.072	0.008	**0.254	0.014	-0.003	-0.103	0.049	-0.045	-0.016
Communications	**0.478	**0.440	**0.261	**0.321	**0.236	**0.269	**0.279	**0.379	**0.480
Affective Responsiveness	**0.382	*0.193	**0.239	**0.355	*0.190	**0.290	**0.307	**0.362	**0.354
Affective Involvement	*0.186	*0.149	0.100	*0.202	0.166	*0.183	**0.288	**0.280	*0.180
Behavioral Control	**0.255	*0.199	0.110	**0.254	0.152	**0.424	**0.266	**0.286	*0.233
General Function	**0.621	**0.423	**0.389	**0.498	**0.417	**0.442	**0.424	**0.521	**0.608

As you see, maximum correlation exists between general function and anxiety/ depression ($r=0.62$) and there is a positive correlation between general function and others ($r=0.60$).

Simultaneous multiple regression has been used for assessment of behavioral problems through family functioning. Introductory analyses are executed for non- linear, multicollinearity and homogeneity of variance. Table 3 shows results and regression statistics.

Table 3: Results of multiple regression for prediction of behavioral problems through family functioning

Predictable Variables	Variables	F	P<	R	R ²	β Standardized	t statistic	P<
Problem solving						0.17	2.08	0.03
Communications						0.20	2.26	0.02
Functions						-0.12	-1.48	0.14
Affective responsiveness	Anxiety/ depression	14.23	0.000	0.680	0.47	0.04	50.00	0.61
Affective involvement						-0.07	-0.61	50.0
Behavioral control						0.02	0.21	0.83
General function						0.53	5.66	0.000
Problem solving						-0.11	-1.24	0.21
Communications						0.41	3.93	0.000
Functions						-0.05	-0.57	0.56
Affective responsiveness	Anxiety/ depression	6.88	0.000	0.55	0.33	-0.29	-2.68	0.008
Affective involvement						0.08	0.72	0.47
Behavioral control						0.06	0.57	0.57
General function						0.37	3.45	0.000
Problem solving						0.21	2.27	0.02
Communications						0.18	1.72	0.08
Functions						0.38	3.76	0.000
Affective responsiveness	Physical Problems	70.5	0.000	0.51	0.26	-0.02	-0.22	0.82
Affective involvement						-30.0	2.39	0.01
Behavioral control						-0.05	-0.51	0.61
General function						30.0	2.74	0.00
Problem solving						0.13	1.43	0.15
Communications						0.04	0.38	70.0
Functions						-0.06	-0.66	50.0
Affective responsiveness	Social Problems	6.23	0.000	0.53	0.28	0.08	0.78	0.43
Affective involvement						-0.03	-0.31	0.75
Behavioral control						0.04	0.39	0.65
General function						0.39	3.56	0.00
Problem solving						10.0	1.06	0.28
Communications						0.06	0.52	60.0
Functions						-0.07	-0.73	0.46
Affective responsiveness	Thinking problems	3.93	0.001	0.44	0.19	-0.09	-0.75	0.45
Affective involvement						0.02	0.22	0.82
Behavioral control						-0.04	-0.36	0.71
General function						0.42	3.63	0.000
Problem solving						-0.06	-0.65	0.51
Communications						-0.02	-0.22	0.81
Functions						-0.26	-2.74	0.00
Affective responsiveness	Attention problems	8044	0.000	0.59	0.24	-0.01	-10	0.91
Affective involvement						-0.09	-0.77	0.44
Behavioral control						0.43	4.11	0.00
General function						0.39	3.76	0.00
Problem solving						-0.04	-0.41	0.68
Communications						0.04	0.38	70.0
Functions						-0.13	-1.23	0.21
Affective responsiveness	Law breaking actions	4.26	0.000	0.46	0.21	0.05	0.46	0.64
Affective involvement						0.19	50.1	0.12
Behavioral control						0.04	0.35	0.72
General function						0.31	2.72	0.00
Problem solving						10.0	1.14	0.25
Communications						0.09	-2.09	0.34
Functions						-20	0.43	0.03
Affective responsiveness	Aggressive behavior	8.24	0.000	0.58	0.34	0.04	1.22	0.66
Affective involvement						0.14	3.65	0.22
Behavioral control						0.01	0.46	0.89
General function						0.38	0.46	0.00
Problem solving						0.08	0.1	0.31
Communications						0.26	2/76	0.00
Functions						-0.05	-0.64	0.52
Affective responsiveness	Others	20.12	0.000	0.65	0.43	-0.11	-1.12	0.26
Affective involvement						-0.07	-0.69	0.49
Behavioral control						0.02	20.0	0.83
General function						0.54	5.59	0.00

Results of table 3 show amount of F test to investigate impact of family functioning on anxiety/ depression, 14.33 which is significant $P=0.000$. Amount of R^2 indicates that 47 % variance of anxiety/ depression is defined

within family functioning. Also, regression coefficient show that problem solving ($\beta = 0.17$), communication ($\beta = 0.20$) and general function ($\beta = 0.17$) may predict significant and positive anxiety/ depression.

Based on results of table 3, amount of F test is 6.88 to study impact of family functioning on anxiety/ depression which is significant $P = 0.000$. Amount of R^2 indicates that 33 % variance of anxiety/ depression is defined within family functioning. In this line, communications ($\beta = 0.41$) and general function ($\beta = 0.37$) may predict significant and positive anxiety/ depression and negative and significant affective responsiveness ($\beta = -0.29$). Amount of F test is 5.80 to study impact of family functioning on physical problems which is significant $P = 0.000$. Amount of R^2 indicates that 26 % variance of physical problems is defined within family functioning. Regression coefficient show that problem solving ($\beta = 0.21$), functions ($\beta = 0.38$) and general function ($\beta = 0.30$) may predict significant and positive physical problems and negative and significant affective involvement ($\beta = -0.30$). Also, results of table 3, amount of F test is 6.23 to study impact of family functioning on social problems which is significant $P = 0.000$. Amount of R^2 indicates that 28 % variance of social problems is defined within family functioning. Regression coefficient show that general function ($\beta = 0.39$) may predict significant and positive social problems.

Results of table 3, amount of F test is 14.33 to study impact of family functioning on anxiety/ depression which is significant $P = 0.000$. Amount of R^2 indicates that 47 % variance of anxiety/ depression is defined within family functioning. Regression coefficient show that problem solving ($\beta = 0.17$), communications ($\beta = 0.20$) and general function ($\beta = 0.17$) may predict significant and positive anxiety/ depression. Amount of F test is 3.93 to study impact of family functioning on thinking problems which is significant $P = 0.001$. Amount of R^2 indicates that 19 % variance of thinking problems is defined within family functioning. Regression coefficient show that general function ($\beta = 0.42$) may predict significant and positive thinking problems. Results of table 3, amount of F test is 8.46 to study impact of family functioning on attention problems which is significant $P = 0.000$. Amount of R^2 indicates that 34 % variance of attention problems is defined within family functioning. Regression coefficient show that functions ($\beta = -0.26$) may predict significant and negative attention problems and behavioral control ($\beta = 0.43$) and general function ($\beta = 0.39$) may predict significant and positive attention problems.

Amount of F test is 4.36 to study impact of family functioning on law breaking action which is significant $P = 0.000$. Amount of R^2 indicates that 21 % variance of law breaking action is defined within family functioning. Regression coefficient show that general function ($\beta = 0.31$) may predict significant and positive law breaking action.

Results of table 3, amount of F test is 8.24 to study impact of family functioning on aggressive behaviors which is significant $P = 0.000$. Amount of R^2 indicates that 34 % variance of aggressive behaviors is defined within family functioning. Regression coefficient show that functions ($\beta = -0.20$) may predict significant and negative aggressive behaviors and general function ($\beta = 0.38$) may predict significant and positive aggressive behaviors. Consequently, amount of F test is 12.20 to study impact of family functioning on other problems which is significant $P = 0.000$. Amount of R^2 indicates that 43 % variance of other problems is defined within family function. Regression coefficient show that communications ($\beta = 0.26$) and general function ($\beta = 0.54$) may predict significant and positive other problems.

Discussion and Conclusion:

Family is considered as the primary social way of individuals and should create balance and relaxation. Warm family is a firm reliance for its members. Their inappropriate performance is accompanying with shortages and refused needs. In fact, family may a background for mental disorders such as, anxiety, depression, moral and social deviations. Family is a limited society in a way and acts and reactions of its members may influence on increase or decrease problems. Indeed, family act based on a system. Impact of family by its own as a unit is more than all parts totally. Generally, studies confirm that inefficient family is a base for crime development and behavioral disorders on one hand and a strong family may help child and support him/ her on the other hand.

This research has been conducted aiming study relationship of family functioning and behavioral disorders. Mostly, it indicates all aspects of behavioral disorders of children within family functioning significantly and it would be stated that;

1- Social problems, thinking problems and law breaking actions may be foreseen through general functioning. Gestalt psychologists believe that total is different from its parts. No aspects of family functioning individually can predict social and thinking problems and law breaking actions significantly but in general do the same. On the other words, there is an internal relationship between family functioning and when they gather may predict social and thinking problems and law breaking actions. The results are as the same found by Baumrind [8], Maccoby and Martin and Shucksmith, et al.,.

2- Aggressive behavior and other problems may predict through functions and general function. Importance of functions is highlighted when family separates explicit and clear functions and is empowered for ordinary and unpredictable changes. Obviously, the matter inhibits aggressive behavior of children. Because, the

children learn to achieve their desires according to the current plans and rules enacted by family. On the other hand, general function within aggressive behavior and other problems including sleep and meal disorder has a significant impact. The research has been done by Bond & McMahan [11] and Emery [12].

3- Anxiety/ depression may predict within problem solving, communications and general function. Importance of communications is highlighted when there is no direct and explicit relationship between family members and the child is not able to explain his/ her feeling affirmatively. Because, parents are not active audiences and do not pay attention. Therefore, the child will be anxious and depressed. Another point, when children have not skill to solve the problems means that they are not able to select their problems. Also, general function may predict anxiety and depression significantly. Those are the same as researches of Bouzermouni, Nagi, et al., and Bouzermouni, Nagi and Ulrich.

4- Anxiety/ depression may predict within communications, affective responsiveness and general function. Importance of affective responsiveness is highlighted when the families seek experience in falling love, sympathy, anger, fear and happiness and participate altogether. The families who are not able to respond on sympathetic so, their children will challenge problems and will be depressed. The same studies have been examined by Bouzermouni, Nagi and Spark [10] and Seaburn, et al.,

5- Physical problems may predict within problem solving, functions, affective involvement and general function. Less or more affective responsiveness may deal children with problems. On the other hand, being interested in children's activities would be essential for their health otherwise, they complain. In addition, problem solving, functions and general function may play a remarkable role in physical problems of children. The same studies have been examined by Fainsilber, Katz and Gottman.

6- Attention problems may predict within functions, behavioral control and general function. Some families follow flexible behavioral patterns but other pursue strict or easy rules. The children in families with flexible behavioral patterns, are compatible against all changes. Functions and behavioral control may predict significant attention problems significantly. The same studies have been examined by Wierson and Forehand [16].

The research may occur problem in results due to statistical society (city of Shahre Ray), program, one gender and definite interval. It is suggested that similar researches in other cities, ages, intervals and both gender should be conducted for comparison.

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